



REPORT OF INDIANA STATE SEAL USAGE

State Form 30071 (R7 / 7-02)
Office of the State Building Commissioner
Code Enforcement Division
Indiana Government Center South
302 W. Washington Street, Room W246
Indianapolis, IN 46204

Report for: (month and year)

Name of manufacturer

Address (city, state, ZIP code)

Plant address (city, state, ZIP code)

☐ State inspection

☐ Third Party Inspection

Inspector name

Company name

Date of Inspection	Date Seal Used	MFR'S Unit Serial No.	Design Release No.	Indiana Seal of Compliance No.	Date of Inspection	Date Seal Used	MFR's Unit Serial No.	Design Release No.	Indiana Seal of Compliance No.

Signature of manufacturer's representative

I HEREBY CERTIFY THAT EACH INDIANA CERTIFICATION LABEL WAS ISSUED IN COMPLIANCE WITH IC 22-15-4-1 or IC 22-15-4-2.